PTO/SB/81 (09-03)

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POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number	10/735,470
Filing Date	December 12, 2003
First Named Inventor	Kumar, Anand R.
Group Art Unit	3627
Examiner Name	Not yet known
Attorney Docket Number	717841.4

I hereby appoint: Practitioners at Customer Number OR 27128						
∐ Pr	actitioner(s) named below	·				
	Nan	ne	Reg	istration Number		
			<u></u>			
as my/o	our attorney(s) or agent(s) to prosecute the appli	cation ide	ntified above, an	d to tran	sact all
busines	s in the United States Pa	tent and Trademark Of	fice conne	ected therewith.		
Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR						
_	Firm or Individual Name	Mark E. Stallion Blackwell Sanders Peper Martin LLP				
Ado	dress	720 Olive Street				
Ado	iress	24th Floor				
City	у	St. Louis	State	Missouri	Zip	63101
Cou	ıntry	United States				
Tel	ephone	314-345-6000	Fax	314-345-6060		
I am the: ☐ Applicant/Inventor. ☐ Assignee of record of the entire interest. See 37 CFR 3.7.1. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record						
Name		Goulet, Vice President				
		al Information Solution				
Signature		My atom Con		······		
Date	MAY	1 14 2004				
NOTE: S	Signatures of all the inventors		e entire inte	rest or their represen	tative(s) a	ire
required.	Submit multiple forms if mo	re than one signature is req				
	al of 1 forms are	e submitted.				

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in the form, call 1-800-PTO-9199 and select option 2.



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STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Anand R. Kumar et al. Application No./Patent No.: 10/735,470 Filed/Issue Date: December 12, 2003 Entitled: METHOD AND APPARATUS FOR PROVIDING INTEGRATED CUSTOMER CARE AND WORK-FLOW MANAGEMENT National Information Solutions Cooperative, Inc., a corporation (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) (Name of Assignee) states that it is: the assignee of the entire right, title, and interest; or an assignee of less than the entire right, title and interest. The extent (by, percentage) of its ownership interest is % in the patent application/patent identified above by virtue of either: A. [x] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel , Frame , or for which a copy thereof is attached. OR B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: 1.From: To: The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached. 2.From: To: The document was recorded in the United States Patent and Trademark Office at Reel ______, Frame _____, or for which a copy thereof is attached. 3.From: To: The document was recorded in the United States Patent and Trademark Office at Reel , Frame ______, or for which a copy thereof is attached. [] Additional documents in the chain of title are listed on a supplemental sheet. [x] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.081 The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. MAY 20, 2004 Vice President and General Counsel Title

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

PTO/SB/18 (08-00)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Num	iber	717841.4	
		First Named Inventor		Kumar, Anand R.	
		COMPLETE IF KNOWN			
		Application Number	Application Number 10/735,470		
	Declaration Submitted With Initial Filing Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	Declaration Submitted after Initial	Filing Date	Decei	mber 12, 2003
		Ŭ .	Group Art Unit	Group Art Unit 3627	
required)	required)	Examiner Name	Not y	vet known	

As a below named in	-	•		11 1					
My residence, mailing	•	•							
I believe I am the original names are listed METHOD AND AP MANAGEMENT	d below)	of the subject ma	itter whi	ich is claimed and	for w	hich a pate	ent is so	ought on the inver	ventor (if ition entitled:
			(T	itle of the Inventior	1)				
the specification of wh	ich								
is attached hereto									
OR		12/12/1			as Unit	ed States A	Applicat	ion Number or PC	T International
was filed on (MM	I/DD/YY)	12/12/2	2003						f applicable).
Application Number	10/735	,470	·	and was amende	d on (N	MM/DD/Y	Y)		
I hereby state that I had amended by any amen					ove ide	entified sp	ecificat	ion, including the	claims as
I acknowledge the du continuation-in-part a and the national or PC	pplication T interna	ns, material infor ational filing date	mation e of the	which became ava	ailable art app	between blication.	the filir	ng date of the prio	r application
I hereby claim foreign certificate, or 365(a) of America, listed below certificate, or any PC	of any PC and have	T international a also identified	applicati below, b	on which designately checking the bo	ted at lox, any	least one o / foreign a	ountry pplicat	other than the Union for patent or in	ited States of eventor's
Prior Foreign Applic				oreign Filing Da		Prior		Certified Cop	
Number(s)		Country		(MM/DD/YYYY		Not clai	med	YES	NO
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						<u> </u>	, DEC		<u> </u>
Additional foreign									nereto:
I hereby claim the ber							ation(s) listed below.	
Application 60/5	n Numbe 11,154	r(s)	F)	iling Date (MM/I 10/14/200		· · · · ·	n s	Additional provisions umbers are listed upplemental prior	on a ity data sheet
			1					TO/SB/02B attac	

[Page 1 of 6]
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENT TO: Assistant Commissioner for Patents, Box Design, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

- · · · · · · · · · · · · · · · · · · ·	stomer Number Bar Code Label	27128		OR 🗌 (Correspondence address below	
Name Mark E. Stallion						
Address Blackwell Sanders Peper Ma	rtin LLP					
Address 720 Olive Street, Suite 2400						
		64	ata Missa		ZIP 63101	
City St. Louis			ate Misso	Juri		
Country US	Tele	phone 314-3	<u>345-6000</u>		Fax 314-345-6060	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENT	NAME OF SOLE OR FIRST INVENTOR:				for this unsigned inventor	
Given Name (first and middle [if any]) Anand R.			amily Na Or Surnar	me ne Kumar		
Inventor's M.R. Awand Kur Signature	nar				Date 5/6/04	
Residence City: Bismarck		State ND	Coi	untry US	Citizenship IN	
Mailing Address 1727 N. Grandview I	_ane					
Mailing Address #108						
City Bismarck	State ND		ZIP 5	58503	Country US	
NAME OF SECOND INVENTOR:		□ A	petition l	nas been filed	for this unsigned inventor	
Given Name (first and middle [if any]) Michael A.			amily Na Or Surnar	me ne Frank		
Inventor's Muchael	1 Africa	Se.			Date 5-6-04	
Residence City: Mandan		State ND	Co	untry US	Citizenship US	
Mailing Address 703 10th Ave SW						
Mailing Address						
City Mandan	State ND		ZIP 5	58554	Country US	
Additional inventors are being name		antal Additi				

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<i>A</i>	ADDITION SUPPLE	NAL INVE MENTAL		• •			
Attorney Docket Number: 717841.4		-					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF THIRD INVENTOR:					for this unsigned inventor		
Given Name Connie L.	1 .						
Inventor's Ophie & Schar	ler				Date 5/6/04		
Residence City: Mandan		State 1	ND	Country US	Citizenship US		
Mailing Address 2201 Wolfsong Loop	South						
Mailing Address PO Box 19	4	· · · · · · · · · · · · · · · · · · ·					
City Mandan	State ND			ZIP 58554	Country US		
NAME OF FOURTH INVENTOR:			A pe	tition has been filed	for this unsigned inventor		
Given Name (first and middle [if any]) Kelley C.				nily Name Surname Kunnar	ız		
Inventor's Hell	Ch	,			Date 5/6/04		
Residence City: Bismarck		State	ND	Country US	Citizenship US		
Mailing Address 7211 Moonlight Road	1						
Mailing Address							
-							
City Bismarck	State ND			ZIP 58503	Country US		
Additional inventors are being name	d on the 3_ sup	plemental Ado	litiona	l Inventor(s) sheet(s) PTO/SB/02A attached hereto:		

PTO/SB/04 (10-00)
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 	ADDITIO: SUPPLE				• •	
Attorney Docket Number: 717841.4						
I hereby declare that all statements made belief are believed to be true; and further the like so made are punishable by fine of may jeopardize the validity of the applica	that these state r imprisonmen	ements	were mad oth, under	de witl 18 U.	h the knowledge tha	at willful false statements and
NAME OF FIFTH INVENTOR:				A pet	tition has been filed	for this unsigned inventor
Given Name Brent					ily Name Surname Roberts	
Inventor's Signature	lail			~_		Date 5-17-04
Residence City: St. Peters			State N	10_	Country US	Citizenship US
Mailing Address 108 Glenallen Drive						
Mailing Address						
City St. Peters	State MO				ZIP 63376	Country US
NAME OF SIXTH INVENTOR:				A pet	tition has been filed	for this unsigned inventor
Given Name (first and middle [if any]) William					ily Name Surname Frame	
Inventor's William	11. S	an	··	-		Date Sporzoox
Residence City: Sunriver			State (OR	Country US	Citizenship US
Mailing Address 17268 Jacinto Road					<u> </u>	
Mailing Address	<u>.</u>					
City Sunriver	State OR				ZIP 97707	Country US
Additional inventors are being name	ed on the 2 su	upplem	ental Add	litiona	I Inventor(s) sheet(s	s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

•	SUPPLE				· •	•
Attorney Docket Number: 717841.4						
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SEVENTH INVENTOR:				A pe	etition has been filed	for this unsigned inventor
Given Name Rex					nily Name Surname Moorma	an
Inventor's Signature						Date 5/17/04
Residence City: Foristell		State MO		Country US	Citizenship US	
Mailing Address 2945 Meyer Road						
Mailing Address						
City Foristell	State MO				ZIP 63348	Country US
NAME OF EIGTHTH INVENTOR:			A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Channon C) .	Family Name Or Surname Lowman				1
Inventor's Signature						Date 5/6/04
Residence City: Mandan			State N	ND	Country US	Citizenship US
Mailing Address 2508 Sunset Drive						
Mailing Address						
City Mandan	State ND	 		l	ZIP 58554	Country US
Additional inventors are being name	ed on the <u>l</u> su	uppleme	ental Add	ition	al Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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1		NAL INVE EMENTAL		` '	
Attorney Docket Number: 717841.4					
I hereby declare that all statements made belief are believed to be true; and further the like so made are punishable by fine or may jeopardize the validity of the applica	that these state r imprisonmen	ements were ma	de with 18 U.	h the knowledge tha	t willful false statements and
NAME OF NINTH INVENTOR:			A pet	ition has been filed	for this unsigned inventor
Given Name Eric				ily Name urname Burke	
Inventor's Signature Sim Sanh	ie				Date 5-19-04
Residence City: O'Fallon		State M	ио	Country US	Citizenship US
Mailing Address 36 Saint Nicholas Ct.					
Mailing Address	T				
City O'Fallon	State MO			ZIP 63366	Country US
NAME OF INVENTOR:			A pet	ition has been filed	for this unsigned inventor
Given Name (first and middle [if any])				ily Name urname	
Inventor's Signature					Date
Residence City:		State 1	1D	Country	Citizenship
Mailing Address					
Mailing Address					
City	State			ZIP	Country
· Additional inventors are being name		onlemental Addit			



PATENT Mtr #717841.5

WHEREAS, Anand R. Kumar, a resident of Bismarck, North Dakota; Michael A. Frank, a resident of Mandan, North Dakota; Connie L. Schaner, a resident of Mandan, North Dakota; Kelley C. Kunnanz, a resident of Bismarck, North Dakota; Brent Roberts, a resident of St. Peters, Missouri; William Frame, a resident of Sunriver, Oregon; Rex Moorman, a resident of Foristell, Missouri; Channon O. Lowman, a resident of Mandan, North Dakota; and Eric Burke, a resident of O'Fallon, Missouri (hereinafter referred to as "Assignors"), are the inventors of a certain new and useful invention relating to a METHOD AND APPARATUS FOR PROVIDING INTEGRATED CUSTOMER CARE AND WORK-FLOW MANAGEMENT for which application for Letters Patent was made as U.S. Provisional Application No. 60/511,154 on October 14, 2003 and as U.S. Patent Application No. 10/735,470 that was filed on December 12, 2003; and

WHEREAS, Assignors are the owners and in full possession of the entire right, title and interest in and to said invention and in and to any and all Letters Patent that may be granted therefor; and

WHEREAS, National Information Solutions Cooperative, Inc., a corporation duly organized under the laws of the State of North Dakota, (hereinafter referred to as "Assignee"), having its principal office and place of business at 4178 N. Service Road, St. Peters, Missouri 63376, is desirous of acquiring the entire right, title and interest in and to said invention and in and to any and all Letters Patent that may be granted therefor; and

NOW, THEREFORE, for and in consideration of the sum of One Dollar (U.S. \$1.00) and other valuable considerations to Assignors paid by said Assignee, receipt of which is hereby acknowledged, Assignors do hereby sell, assign and transfer unto said Assignee, the entire right, STLD01-1068760-1

States and foreign, that may be granted therefor, together with any and all continuations, divisions, or reissues, and Assignors do hereby authorize and request the United States

Commissioner of Patents and Trademarks to issue in accordance with this Assignment any and all Letters Patent that may be granted, either on said application or otherwise for said invention.

This Assignment is effective as of October 14, 2003.

IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.

Dated: 5/6/04

Anand R. Kumar

STATE OF NORTH DAKOTA)

() ss

(COUNTY OF MORTON)

On this day of MAin, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Anand R. Kumar to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Notary Public

My Commission Expires:

Dated: $\frac{5/6/2004}{}$

Michael A. Frank

STATE OF NORTH DAKE TA)

) ss.

COUNTY OF MORTON

On this 6 day of 1/2, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Michael A. Frank to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Notary Public

My Commission Expires:

Dated: 56/04 Connie L. Schaner	-
STATE OF NORTH DAKOTA)) ss. COUNTY OF MORTON)	
On this day of May, 2004, before me, the undersigned, a Notary Public and for the County and State aforesaid, personally appeared Connie L. Schaner to me know be the person described in and who executed the foregoing instrument, and acknowledged she executed the same as her free act and deed.	own to
In Witness Whereof, I have hereunto attached my hand and notarial seal, at the Co and State aforesaid on the day and year last above written. Notary Public	ounty
My Commission Expires:	

-10 100 Dela ID

IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal,

Dated: 5/6/0

Kelley C. Kunnanz

STATE OF NORTH DAKOTA)

COUNTY OF MORTON

On this day of MAy, 2004, before me, the undersigned, a Notary Public within and for the County and State afore aid, personally appeared Kelley C. Kunnanz to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Notary Public

My Commission Expires:

Dated: _	5-17-04	& Cout Hotel	
-		Brent Roberts	

STATE OF Missouri)
COUNTY OF Stebales) ss.

On this 17 day of ______, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Brent Roberts to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Notary Public

My Commission Expires:

GLORIA A. JOHNSTON Notary Public - State of Missouri St. Charles County My Commission Expires: July 5, 2004

Dated: 5/10/2004

STATE OF Oneson)

(COUNTY OF Deschutes)

On this 10 day of May, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared William Frame to me known to be proved to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County

and State aforesaid on the day and year last above written.

otary Public

My Commission Expires: August 25,2007

Dated: <u>5/17/64</u> Rex Moorman

STATE OF Missouri)

COUNTY OF ST Charles)

On this 17 day of May, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Rex Moorman to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Motary Public Character

My Commission Expires:

GLORIA A. JOHNSTON Notary Public - State of Missouri St. Charles County My Commission Expires: July 5, 2004

Dated: 5/6/04 Channon O. Lowman

STATE OF NORTH DAKOTA)

COUNTY OF MORTON

) ss.

On this day of Ay, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Channon O. Lowman to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Notary Public

My Commission Expires:

Dated:	5-17-04	En Embe
_		Eric Burke

STATE OF Missouri)
COUNTY OF STCharles) ss.

On this <u>17</u> day of <u>Mayo</u>, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Eric Burke to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Notary Public

My Commission Expires:

GLORIA A. JOHNSTON Notary Public - State of Missouri St. Charles County My Commission Expires: July 5, 2004